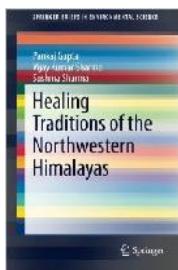
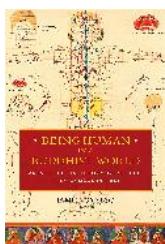


REVIEW: HEALING TRADITIONS OF THE NORTHWESTERN HIMALAYAS AND BEING HUMAN IN A BUDDHIST WORLD

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Pankaj Gupta, Vijay Kumar Sharma, and Sushma Sharma. 2014. *Healing Traditions of the Northwestern Himalayas*. New Delhi: Springer. xxii + 149. Three figures, fourteen tables, preface, appendix, index. Volume 15, SpringlerBrief in Environmental Science. ISBN: 978-8132219248 (hardcover, 51.99EURO).



Janet Gyatso. 2015. *Being Human in a Buddhist World. An Intellectual History of Medicine in Early Modern Tibet*. New York: Columbia University Press. xi + 519. Fifty-one illustrations, technical note, abbreviations, index. ISBN: 978-0231164962 (hardcover, 45USD).

These two contributions address the important topics of Himalayan and Tibetan medicine. Gupta et al. is a book of science, primarily focused on the knowledge about, and the therapeutic effects of, plants and plant products in Himachal Himalaya, India. Gyatso's work is an intellectual history of the mutual influence of healing knowledge and Buddhism in early modern Tibet. Both books ask a crucial question: What is medicine in a Himalayan and Tibetan landscape? While both texts also contextualize medicine in a broader scenario, considering medicine as a non-Western tradition, Gupta et al. understand Himalayan medicine as an insular system, while Gyatso sees parallels between Tibetan and Western medical traditions, particularly in the relationship between the religious and the empirical.

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Healing Traditions of the Northwestern Himalayas, begins with a Voltaire quote: "The art of medicine consists of keeping the patient amused while nature heals the disease" (xix). From his vantage point of Enlightenment, Voltaire looked sarcastically at the so-called "art of medicine" (the French source would probably be better translated with "physician," so "the art of the physician") and talked consistently about its deplorable condition. Voltaire argued the point that medicine was far from being a science, or more accurately, he considered it an art and not a proper science. As an art, medicine was ineffective if not dangerous to the patient, and practicing physicians would do better to demonstrate qualities of empathy and compassion, to entertain the patient, and to avoid the cure, hoping that nature would heal the disease. For Voltaire, then, medicine was ineffective because it was not scientific enough. Although this statement may have been wholly true in the eighteenth century, today medicine is considered an applied science and it is debatable whether Voltaire would maintain such a statement.

Gupta and his co-authors, however, seem to aim for a different interpretation, that is, that humans seem to have forgotten that nature heals the disease. Humans rely so much on the effectiveness of science that they are ready to disengage from the so-called non-scientific remedies of natural and alternative medicine. The traditional knowledge of medicine that the indigenous Himalayan population has developed over the centuries is rapidly eroding under the expansion of scientific medicine; traditional medicine now lacks credibility to be recognized on par with scientific medicine. While the forces of modern medicine make inroads and cause the decline of traditional medicine, the whole system of knowledge that is embedded in traditional medicine - environmental concerns, social practices, religious wisdom - is at risk of disappearing.

Readers may recognize here the familiar narrative of modernization vs. tradition, West vs. East, external influences vs. organic connections. While acknowledging the challenge that modern medicine poses to traditional medicine, the authors make a strong case in favor of the latter. They argue for a noble effort to preserve its

knowledge. Indigenous knowledge based on thousands of years of tradition and records of popular healing should be preserved despite new developments and progress in the field of scientific medicine.

The authors work at Himachal Pradesh University, Shimla, India. Sushma Sharma is Professor of Biosciences in the Department of Bio-sciences, Pankaj Gupta is senior researcher officer with a doctorate in Biosciences, and Vijay Kumar Sharma is a project officer at the Institute of Integrated Himalayan Studies. Their book continues a recent trend of well-researched academic papers and books on medicinal plants in Indian Himalaya and both sociologists and bioscientists will find it worthwhile. Sociologists will learn about the social aspects of healing practice and knowledge and bioscientists about the medical aspects.

The book consists of a Preface, Prologue, Epilogue, Appendix, and six chapters. Core material is presented in chapters Five and Six, which target traditional herbal medicines. The previous four chapters investigate the traditional knowledge that sustains and empowers healing practices. These chapters are not simply a preamble to the following chapters on herbal medicines, but are essential to the main narrative, as the authors maintain an ecological perspective, in which the relation between knowledge and plants resembles the "oyster working on a pearl" sequence. From this ecological perspective, the authors stress the interdependence between knowledge and plants, for the plant's value resides not in its own intrinsic therapeutic properties, but in the immensity of the knowledge that has been built around it.

In the Prologue, the authors introduce the Himalayan healing tradition as an indigenous complex system of medicine with no discernible influence from the Western sciences. Authors define "medicine" as folk medicine, a formalized healing tradition incorporating heterodox practices such as chiropractic, naturopathy, and osteopathy. It follows the emergence of a unique and effective healing knowledge that is open to absorb components from other practices and that is organically linked to other aspects of indigenous knowledge. Healing is not a function and knowledge is not a science.

Instead, the diverse therapeutic procedures followed by healers are integrated in the socio-cultural life of Himalayan communities.

Chapters One through Four are short in length and cover a wide range of issues. Entitled "The Bountiful Himalaya", Chapter One introduces terms and concepts, in particular the relation between community, healing, and knowledge systems. Chapter Two, 'Health and Folk Medicine', is a quick tour de force on healing systems, their definition and categorization, the lesser known traditions, and recent research studies on healing traditions in the Himalayan region. Chapter Three, entitled 'Ethnic Food as Medicament', explores the fascinating notion of food as medicament. Chapter Four, 'Mystic Healers', examines the intersection between Buddhist metaphysics and secular medicine, and investigates notions such as healing in authoritative scriptures and holiness and belief healing.

Chapters Five and Six are dedicated respectively to 'Traditional Herbalists' and 'Indigenous *Materia Medica*'. The former focuses on the ethno-botanical aspects of medicinal plants and the traditional selection and processing of herbs. Moreover, the chapter addresses the distinct therapeutic procedures followed by Himalayan healers and their significance in the socio-cultural life of the Himachal Himalayas (the section of the vast Himalaya mountain system in the Indian state of Himachal Pradesh) society.

Chapter Six is a short assessment of the material used by folk herbalists, including medicinal plants, animals, and minerals. An Epilogue and three appendices conclude the work.

An intellectual historian, and Hershey Professor of Buddhist Studies at Harvard University, Janet Gyatso serves on the faculty of the Divinity School. Her writing has centered on intellectual resources for the understanding of Buddhist and Tibetan history. Her new book, *Being Human in a Buddhist World*, opens with a sequence of gorgeous medical illustrations in early modern Tibet. This serves as a gateway to the complex, sometime counter-intuitive relationship between Buddhism and medicine in Tibet, particularly from the sixteenth to eighteenth centuries. Illustrations during the period of

the Fifth Dalai Lama (seventeenth century) and his regent, Desi Sangye Gyatso, show the long history of interaction and mutual influence in Tibetan medicine between the knowledge of the body and professional medical ethics on one side and religious values and sensibilities about the Human on the other. The book is thus a contemporary investigation of Buddhism's role in the development of Tibetan medicine and of the establishment of an empirical tradition that became independent from scriptural authority.

The main idea behind *Being Human* is precisely that Tibetan medicine as a science maintained a nuanced relationship with Buddhism, absorbing the epistemological while rejecting the ontological. Or, as a non-Western discipline, Tibetan medicine operated to some degree as a Western science, that is, it absorbed ethical and epistemological categories from the religious while maintaining a disciplined concern for the empirical and the imperfectability of the human condition. Gyatso sees this dialogue between scriptural authority and empirical authority on the nature of human anatomy as capable of enriching both without diminishing the distance between the two. She understands that Tibetan medicine and Buddhism influence each other while maintaining key differences in attitude toward gender and sex, the status of human nature, and the moral character of the physician.

In short, Gyatso attempts to reshape the classic idea that Buddhism permeated every aspect of Tibetan society, including medicine and that, as a consequence, tantric anatomy coincided with medical anatomy. Not so, the author argues, although her strategy is to explore both the disjunctions and conjunctions between the tantric literature of the human and the medical system of the body.

In fact, readers will realize from her book that two basic approaches dominated the Tibetan literature. The first approach posits the tantric system as essentially a different (superior) order than Tibetan medical system, and the second tries to reconcile the two systems. The two approaches coexisted in the early modern Tibetan era.

The book is divided into an Introduction; Parts I, II, and III; and a Conclusion. The Introduction is mostly dedicated to a literature

review and to methodological concerns, including the author's decision to move backward in time rather than forward in order to orient the reader to the complexity of the intersection between "Buddhist revelation with [Tibetan] scientific investigation in medicine" (13). The time of the Fifth Dalai Lama encapsulates well the larger historiographical question of the intersection of early modern sensibilities and religious ideals and absolutes that lie at the core of the book.

Part I, consisting of two chapters, locates the story in Lhasa, and builds the historical background. Chapter One, titled 'Reading Paintings, Painting the Medical, Medicinalizing the State', examines the expansion of medicine in the Tibetan state in the sixteen century. Chapter Two, 'Anatomy of an Attitude: Medicine Comes of Age', deals with the emergence of anatomy as an attitude in the same age. Part II, titled 'Bones of Contention', addresses Tibetan Buddhist anatomy and how a "Tantric body" coexisted with a "medical body" - the body that is to be treated with medical practice.

Part II consists of three chapters and an addendum. Chapter Three, 'The Word of the Buddha', maps the history of the articulated relation between religious and secular medical knowledge. Chapter Four, titled 'The Evidence of the Body, Medical Channels, Tantric Knowledge', focuses on that relation from the Tantric perspective. This chapter includes several stories. For example, Gyatso describes the case of Darmo Menrampa Losang Chödrag, who worked in the field of medicine. He studied Tibetan texts, completed medical treatises, taught at one of the medical schools, and was allowed to perform surgery on the fifth Dalai Lama. In 1670, he gathered his students and dissected the corpses of four male and female Tibetans of varying age in a Lhasa park. Chödrag found 365 bones in the body, five more than the accepted number in medical literature (193).

Titled 'Tangled Up in System: The Heart, in the Text and in the Hand', Chapter Five continues the story of the relation of Tantric and Tibetan medical knowledge, focusing specifically on the anatomical study of heart. The addendum, 'Coda: Influence, Rhetoric, and Riding Two Horses at Once', serves as a brief summary of the issues addressed in Part II.

Part III shifts the focus from practice to practitioners. It consists of two chapters. Chapter Six, titled 'Women and Gender', explores key differences between Tibetan medicine and Tantric anatomy with regard to gender and sex. Chapter Seven, 'The Ethics of Being Human: The Doctor's Formation in a Material Realm', examines the shaping of medical ethics to serve the physician and eventually the patient, too.

The Conclusion summarizes the main outputs of the book. It also provides a synthetic overview of the issues to investigate in order to reach a more definite understanding of medicine knowledge and practice in Tibet.

Through her unique focus and sophisticated reading of source materials, Gyatso reveals the medical knowledge of Tibet during the time of the Fifth Dalai Lama and thus helps redefine the encounter of Buddhism and science in the larger context of Tibetan culture. Any scholar interested in the history of Tibetan medicine or seeking to learn more about intellectual encounters between Buddhism and science in Tibetan history would find the book worth reading.

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